2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000093640

Entity Name: ALL WIGGED OUT, LLC

FILED Dec 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1058 E VENICE AVE VENICE, FL 34285

Current Mailing Address: New Mailing Address:

1058 E VENICE AVE VENICE, FL 34285

FEI Number: 26-1855989 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIPES, TAMARA L

191 LEE ROAD

VENICE, FL 34292 US

SIPES-GRAHAM, TAMARA L

191 LEE ROAD

VENICE, FL 34292 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: TAMARA SIPES-GRAHAM 12/04/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR () Delete Title: MGR (X) Change () Addition SIPES, TAMARA L SIPES-GRAHAM, TAMARA L Name: Name: Address: 191 LEE ROAD Address: 191 LEE ROAD City-St-Zip: VENICE, FL 34292 US City-St-Zip: VENICE, FL 34292 US

Title: MGR () Delete Title: () Change () Addition

 Name:
 GRAHAM, MARK
 Name:

 Address:
 191 LEE ROAD
 Address:

 City-St-Zip:
 VENICE, FL 34292 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TAMARA SIPES-GRAHAM MGR 12/04/2009